| REQUEST FOR TECHNICIAN COMPATIBILITY OF MILITARY ASSIGNMENT                           |                                |                       |                        |
|---|--------------------------------|-----------------------|------------------------|
| PERSON REQUESTING AUTHORITY TO CHANGE MILITARY ASSIGNMENT                             |                                |                       |                        |
| Name, Grade and Position Title  |                                | Organization          |                        |
|   |                                |                       |                        |
|   |                                |                       |                        |
|   | PERSONNEL DATA                 |                       |                        |
| Name, Grade of Person to be Reassigned  |                                | PDC                   | CN (Position Number)   |
| Name, Grade of Ferson to be Reassigned  |                                | 1.50                  | nt (i osition itamber) |
|   |                                |                       |                        |
| December Military Hulf of Analysis and Landian  |                                |                       |                        |
| Present Military Unit of Assignment and Location                                      |                                | Present MOS/SSI/AFSC  |                        |
|   |                                |                       |                        |
|   |                                |                       |                        |
| Proposed Military Unit of Assignment and Location                                     |                                | Proposed MOS/SSI/AFSC |                        |
|   |                                |                       |                        |
|   |                                |                       |                        |
| ACTION DV HUMAN DECOURAGE (UDO)   |                                |                       |                        |
| Date ACTION BY HUMAN RESOURCES OFFICE (HRO)  Approval Action (circle one and initial) |                                |                       |                        |
| Date  | Approva                        | Action (circle on     | e and miliary          |
|   | Approved                       |                       | Disapproved            |
|   | • •                            |                       | ••                     |
| Name, Grade and Position Title  |                                | Signature             |                        |
|   |                                |                       |                        |
|   |                                |                       |                        |
| Remarks (Use remarks to reflect why the technicia                                     | n is being reassigned, i.e.: r | eorganization, promot | ion, command, etc.)    |
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